FORM D



Type of Filing: New Filing Amendment

Premium Power Corporation Address of Executive Offices

300 Willow Street, South

North Andover, MA 01845

Brief Description of Business

Type of Business Organization

Corporation

☐ business trust

(if different from Executive Offices)

Enter the information requested about the issuer

Actual or Estimated Date of Incorporation or Organization:

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

A. BASIC IDENTIFICATION DATA

10	7010
ŧ -	OMR APPROVAL
	OMB Number: 3235-0076
	Expires: April 30, 2008
	Estimated average burden
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Prefix

SEC USE ONLY

Serial

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ange.)	SECTION
Telephone Number (including (978) 379-5000 Telephone Number (including	
	PROCESSED
other (please specify):	APR 1 3 2007
☑ Actual ☐ Estimated viation for State:	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Year

0 2

CN for Canada; FN for other foreign jurisdiction)

DE

0 5

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Address of Principal Business Operations (Number and Street, City, State, Zip Code)

Develop, manufacture, and market advanced, rechargeable energy storage systems.

Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ Section 4(6) ☐ ULOE

(Number and Street, City, State, Zip Code)

limited partnership, already formed

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

limited partnership, to be formed

Series B Convertible Preferred Stock of Premium Power Corporation

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (5/91)

10477556_1

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Х Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and X Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Colello, Gary Business or Residence Address (Number and Street, City, State, Zip Code) c/o Premium Power Corporation, 300 Willow Street, South, North Andover, MA 01845 Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Darcy, Dennis Business or Residence Address (Number and Street, City, State, Zip Code) c/o Premium Power Corporation, 300 Willow Street, South, North Andover, MA 01845 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) McCall, Peter Business or Residence Address (Number and Street, City, State, Zip Code) 515 Madison Avenue, Suite 3702, New York, NY 10022 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Sednaoui, G. Carter Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 213, Princeton, NJ 08542 Check Box(es) that Apply: Promoter ⊠ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) MKSKH LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o M. Kent Sednaoui, 472 Bedford Center Road, Bedford, NY 10506 ☐ Beneficial Owner Check Box(es) that Apply: □Promoter ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Check Box(es) that Apply: Promoter ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Promoter □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

Business or Residence Address (Number and Street, City, State, Zip Code)

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Beneficial Owner

Check Box(es) that Apply: Promoter

Full Name (Last name first, if individual)

						B. INFO	RMATIO	N ABOU	T OFFER	RING					
1.	Has the	issuer sol	d, or does t	he issuer in	tend to sell,	to non-acc	redited inve	estors in thi	s offering?				••••••	Yes . 🗆	No ⊠
			4		,	Answer also	in Append	lix, Column	2, if filing	under ULO	E.				
2.	. What is the minimum investment that will be accepted from any individual?								\$ N/A						
3.	. Does the offering permit joint ownership of a single unit?								Yes ⊠	No □					
4.	remune person	eration for a or agent of ve (5) perso	solicitation f a broker o	of purchase or dealer reg	ers in conne istered with	ction with : the SEC a	sales of sec nd/or with a	urities in th a state or st	e offering. ates, list the	If a person name of th	to be listed e broker or	nission or sir is an associ dealer. If n r that broker	ated nore		
Full i	Name (Li	ast name fi	rst, if indiv	idual)											
Busit	ness or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Nam	e of Asso	ciated Bro	ker or Deal	er						 -				•	
State	s in Whic	h Person I	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers							=	
	(Check	'All States'	or check i	ndividual S	tates)	•••••		**************		•••••••		All States			
	[AL] [IL] [MT] [RI]	[AK] ([N] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	(CO) (LA) (NM) (UT)	[CT] [ME] [NY] [VT]	[DE) [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M1] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] _[WY]	[ID] [MO] [PA] [PR]		
Full l	Name (La	ışt namıc fii	rst, if indivi	idual)											
Busir	ness or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)		:		·-				
Nam	e of Asso	ciated Bro	ker or Deal	er				'					·	·	
State	s in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers	 _					···		
(Che	ck "All S	tates" or ch	neck individ	dual States)		************		**************	*******************************			All States			
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	CT] [ME] [NY] [VT]	[DE] (MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	<u>-</u>	
			rst, if indivi												
			·	mber and S	treet, City,	State, Zip C	Code)						_		
Name	of Asso	ciated Brol	ker or Deal	er										•	
State	s in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers								
(Chee	k "All S	tates" or ch	eck individ	lual States).		**************						All States			
	[AL] (IL) [MT] [RI]	[AK] (IN] [NE] [SC]	[AZ] (IA) [NV] _[SD]	[AR] [KS] [NH] [TN]	[CA] (KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT) (ME) [NY] [VT]	[DE] {MD} [NC] [VA]	[DC] {MA} [ND] [WA}	(FL) {M!} (OH) [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	s .	s
	Equity	\$ 8,767,712	\$ 8,767,712
	☐ Common ☑ Preferred		•
	Convertible Securities (including warrants)	S	s
	Partnership interests	\$	S
	Other (Specify)	S	\$
	Total	\$ 8,767,712	\$ 8,767,712
	Answer also in Appendix, Column 3, if filing under ULOE.	· · · · ·	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	87	\$ 8,767,712
	Non-accredited investors		s
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		S
	Rule 504		S
	Total		S
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		S
	Legal Fees	_ ⊠	\$ 40,000
	Accounting Fees	_ _	S
	Engineering Fees	_	s
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		5
	Total	_ ⊠	\$ 40,000

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	C. OFFERING PR	ICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS		
4.	b. Enter the difference between the aggregate of expenses furnished in response to Part C - Quest issuer."	Tering price given in response to Part C - Question 1 and to ion 4.a. This difference is the "adjusted gross proceeds to	otal the	\$ 8,727,712	
5 .	the purposes shown. If the amount for any purposes	proceeds to the issuer used or proposed to be used for each ose is not known, furnish an estimate and check the box to sted must equal the adjusted gross proceeds to the issuer se	the		
			Payments to Officers, Directors, & Affiliates	Payments To Others	
	Salaries and fees		<u>5</u>	□ s	
	Purchase of real estate		, 🗀 s	□ s	
	Purchase, rental or leasing and installation of ma	chinery and equipment		□s	
	Construction or leasing of plant buildings and fac	cilities	<u> </u>	□s	
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass pursuant to a merger)		s	□s	
	Repayment of indebtedness	4	D\$	□s	
	Working capital			⊠ \$ 8,727,712	
	Other (specify):		□ \$	□ \$	
	Column Totals		s	⊠ \$ 8,727,712	
	Total Payments Listed (column totals added)	<u>S</u> \$ 8,77	⊠ \$ 8,727,712		
		D. FEDERAL SIGNATURE			
an ur		he undersigned duly authorized person. If this notice is fil irities and Exchange Commission, upon written request of			
Iss	er (Print or Type)	Signature /	Date		
	mium Power Corporation	grande 1	April 5 , 2007	···	
	ne of Signer (Print or Type) ry Colello	Title of Signer (Print or Type) President			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

ATTENTION

